

Patient: Aiken, Paul D**Lab:** ANA w/Reflex**Date:** 2013-05-28

Name	Value	Reference Range
ANA Direct	Negative	Negative

Notes:*Lab:** acute phase reactant Erythrocyte Sedimentation Rate (ESR)**Date:** 2013-05-28

Name	Value	Reference Range
Sedimentation Rate-Westergren	2	0-30 mm/hr

Notes:*Lab:** acute phase reactant C-Reactive Protein**Date:** 2013-05-28

Name	Value	Reference Range
C-Reactive Protein, Quant	0.3	0.0-4.9 mg/L

***Notes:**

PERFORMING LAB: LabCorp Raritan, 69 First Avenue, Raritan, NJ - 088691800, Phone - 8006315250, Director - MDReyes

Lab: Complete Blood Count (CBC with Platelets)**Date:** 2013-05-28

Name	Value	Reference Range
WBC	10.2	4.0-10.5 x10E3/uL
RBC	4.80	4.14-5.80 x10E6/uL
Hemoglobin	15.6	12.6-17.7 g/dL
Hematocrit	45.6	37.5-51.0 %
MCV	95	79-97 fL
MCH	32.5	26.6-33.0 pg
MCHC	34.2	31.5-35.7 g/dL
RDW	13.6	12.3-15.4 %
Platelets	284	140-415 x10E3/uL
Neutrophils	69	40-74 %
Lymphs	20	14-46 %
Monocytes	11	4-13 %
Eos	0	0-7 %
Basos	0	0-3 %
Neutrophils (Absolute)	7.0	1.8-7.8 x10E3/uL
Lymphs (Absolute)	2.1	0.7-4.5 x10E3/uL
Monocytes(Absolute)	1.1 H	0.1-1.0 x10E3/uL
Eos (Absolute)	0.0	0.0-0.4 x10E3/uL
Baso (Absolute)	0.0	0.0-0.2 x10E3/uL
Immature Granulocytes	0	0-2 %
Immature Grans (Abs)	0.0	0.0-0.1 x10E3/uL

Notes:*Lab:** Chemistry Profile, Serum**Date:** 2013-05-28

Name	Value	Reference Range
Glucose, Serum	109 H	65-99 mg/dL
BUN	18	6-24 mg/dL
Creatinine, Serum	0.96	0.76-1.27 mg/dL
eGFR If NonAfricn Am	89	>59 mL/min/1.73
eGFR If Africn Am	103	>59 mL/min/1.73
BUN/Creatinine Ratio	19	9-20
Sodium, Serum	139	134-144 mmol/L
Potassium, Serum	4.2	3.5-5.2 mmol/L
Chloride, Serum	98	97-108 mmol/L
Carbon Dioxide, Total	25	20-32 mmol/L
Calcium, Serum	9.9	8.7-10.2 mg/dL
Protein, Total, Serum	6.7	6.0-8.5 g/dL
Albumin, Serum	4.6	3.5-5.5 g/dL
Globulin, Total	2.1	1.5-4.5 g/dL
A/G Ratio	2.2	1.1-2.5
Bilirubin, Total	0.5	0.0-1.2 mg/dL

Alkaline Phosphatase, S	58	25-150 IU/L
AST (SGOT)	14	0-40 IU/L
ALT (SGPT)	17	0-44 IU/L

Notes:*Lab:** Hepatitis C antibody**Date:** 2013-05-28

Name	Value	Reference Range
Hep C Virus Ab	<0.1	0.0-0.9 s/co ratio
	Negative: < 0.8	
	Indeterminate 0.8 - 0.9	
	Positive: > 0.9	

In order to reduce the incidence of a false positive result, the CDC recommends that all s/co ratios between 1.0 and 10.9 be confirmed by a more specific supplemental or PCR testing. LabCorp offers HCV Ab w/Reflex to Verification test #144065.

Notes:*Lab:** Lyme, Western Blot, IgG and IgM, Serum**Date:** 2013-05-28

Name	Value	Reference Range
IgG P93 Ab.	Absent	
IgG P66 Ab.	Absent	
IgG P58 Ab.	Absent	
IgG P45 Ab.	Absent	
IgG P41 Ab.	Absent	
IgG P39 Ab.	Absent	
IgG P30 Ab.	Absent	
IgG P28 Ab.	Absent	
IgG P23 Ab.	Absent	
IgG P18 Ab.	Absent	
Lyme IgG WB Interp.	Negative	
	Positive: 5 of the following Borrelia-specific bands: 18,23,28,30,39,41,45,58, 66, and 93.	
	Negative: No bands or banding patterns which do not meet positive criteria.	
IgM P41 Ab.	Absent	
IgM P39 Ab.	Absent	
IgM P23 Ab.	Absent	
Lyme IgM WB Interp.	Negative	

Note: An equivocal or positive EIA result followed by a negative Western Blot result is considered NEGATIVE. An equivocal or positive EIA result followed by a positive Western Blot is considered POSITIVE by the CDC.

Positive: 2 of the following bands: 23,39 or 41
Negative: No bands or banding patterns which do not meet positive criteria.
Criteria for positivity are those recommended by CDC/ASTPHLD.
p23=Osp C, p41=flagellin

Note:
Sera from individuals with the following may cross react in the Lyme Western Blot assays: other spirochetal diseases (periodontal disease, leptospirosis, relapsing fever, yaws, and pinta); connective autoimmune (Rheumatoid Arthritis and Systemic Lupus Erythematosus and also individuals with Antinuclear Antibody); other infections (Rocky Mountain Spotted Fever; Epstein-Barr Virus, and Cytomegalovirus).

Notes:*Lab:** Vitamin B12 and Folate**Date:** 2013-05-28

Name	Value	Reference Range
Vitamin B12	499	211-946 pg/mL
Folate (Folic Acid), Serum	15.7	>3.0 ng/mL
A serum folate concentration of less than 3.1 ng/mL is considered to represent clinical deficiency.		

***Notes:**

Lab: Vitamin D, 25-Hydroxy

Date: 2013-05-28

Name	Value
Vitamin D, 25-Hydroxy	28.0 L
Vitamin D deficiency has been defined by the Institute of Medicine and an Endocrine Society practice guideline as a level of serum 25-OH vitamin D less than 20 ng/mL (1,2). The Endocrine Society went on to further define vitamin D insufficiency as a level between 21 and 29 ng/mL (2).	
1. IOM (Institute of Medicine). 2010. Dietary reference intakes for calcium and D. Washington DC: The National Academies Press.	
2. Holick MF, Binkley NC, Bischoff-Ferrari HA, et al. Evaluation, treatment, and prevention of vitamin D deficiency: an Endocrine Society clinical practice guideline. JCEM. 2011 Jul; 96(7):1911-30.	

Reference Range
30.0-100.0 ng/mL

*Notes:

Lab: Homocyst(e)ine, Plasma

Date: 2013-05-28

Name	Value
Homocyst(e)ine, Plasma	8.4

Reference Range
0.0-15.0 umol/L

*Notes: